Subrecipient Statement of Collaborative Intent

Part I: To be completed by all subrecipients/subcontractors

All subrecipients as well as potential subcontractors who anticipate funding under a federal or non-federal "contract" must complete this form when submitting a proposal to UCI. It provides a checklist of documents and certifications required by prime sponsors and it must be endorsed by the subrecipient's authorized institutional representative

prior to proposal submission.		
SUBRECIPIENT INFORMATION		
Legal Name: Sloan Kettering Institute for Cancer Research	Authorized Official Name: Annmarie L. Pacchia, PhD	
Address: 1275 York Avenue New York, NY 10065-6007	Address: 1275 York Avenue New York, NY 10065-6007	
DUNS #: 064931884	Email: sponsor@mskcc.org	
Subrecipient PI: Dr. John Chodera	Financial Contact Name: Annmarie L. Pacchia, PhD	
Address: 1275 York Avenue New York, NY 10065-6007	Address: 1275 York Avenue New York, NY 10065	
Email: john.chodera@choderalab.org	Email: sponsor@mskcc.org	
SUBRECIPIENT PROJECT INFORMATION		
UCI PI: Dr. David Mobley	Project Title: Advancing predictive physical modeling through	
Prime Sponsor: University of California, Irvine	Total Proposed Amount: \$864,703	
	Project Period: 7/1/17-6/30/22	
PROPOSAL DOCUMENTS		
The following document are included in our subaward proposal an	d covered by the certifications below:	
X Scope of Work (Required)	□Cost Sharing Amount (if applicable):	
X Budget and Justification (Required)	Other: Click here to enter text.	
X Biosketches		
CERTIFICATIONS		
Documentation of Subrecipient's approval(s) may be required		
Subrecipient's Scope of Work Includes:	☐ Dual Use Research of Concern (DURC)	
☐ Human Subjects	For applicability, please refer to	
If human subjects are involved, have all key personnel	http://www.phe.gov/s3/dualuse/Documents/durc-policy.pdf	
completed human subjects training? ☐Yes ☐No	□Large Scale Human or Non-Human Genomic Data (if NIH)	
□ Vertebrate Animals	For applicability, please refer to policy at	
□Stem Cells	https://gds.nih.gov/03policy2.html. Documentation of an approved	
X Recombinant DNA	consent form and Institutional Certification will be required prior to the	
A Recombinant DNA	award, at the "Just in Time" stage.	
SUBRECIPIENT VS. CONTRACTOR DETERMINATION		
Check all that apply:		
Subrecipient	Contractor	
☐ Performance represents an intellectually significant portion	☐ Provides goods or services that are ancillary to the	
of the overall programmatic effort and is measured against	operation of the program identified in the prime award	
the objectives of the program	☐ Provides the goods or services purchased with the funds	
□Will use the funds to carry out a program for a public	within normal business operations	
purpose, as opposed to providing goods or services for the	□ Provides similar goods or services to many different	
benefit of UCI	purchasers	
☐ Is responsible for adhering to applicable program	☐ Is not subject to the compliance requirements of the	
requirements specified in the prime award	program as a result of the agreement with UCI	
The state of the s	Programme in the control of the cont	
There is an identified principal investigator for the	□ Normally operates in a competitive environment	
subrecipient who has responsibility for making programmatic		
decisions		
For the purpose of this proposal, my organization is properly catego	rized as (check one): Usubrecipient Usubcontractor as	
described above.		
By signing below, I certify that I am the authorized institutional representative and the information and representations made herein are true an		
accurate. The appropriate programmatic and administrative personnel in	volved in this application are aware of agency policies in regard to subaward	
and are prepared to establish the necessary inter-institutional agreemen	ts consistent with those policies. Any work begun and/or expenses incurre	

prior to execution of a subaward agreement are at the subrecipient's own risk.

A Jason St. Germain

Director Signature of Subrecipient's Authorized Institutional Official

Date:

Annmarie L. Pacchia, PhD, Vice President, ORPA

Name and Title of Subrecipient's Authorized Institutional Official

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Part II: To be Completed by Subrecipients/Subcontractors NOT participating in the FDP Clearinghouse Pilot For list of participating institutions, see http://sites.nationalacademies.org/cs/groups/pgasite/documents/webpage/pga 173303.pdf

Cert	ifications
1. Facilities & Administrative Rates included in this proposal have been calculated based on the following:	
	X Our federally negotiated F&A rate for this type of work. See Attached
	☐ No federal negotiated rate and we hereby agree to accept the 10% de minimis MTDC rate as a subrecipient. In the case of NIH: NIH will continue to reimburse F&A costs to foreign and international organizations at a rate of 8 percent of
	modified total direct costs (MTDC) less only equipment.
	☐ A reduced F&A rate dictated by the prime sponsor that we hereby agree to accept. Rate: Base:
	☐ Other rates (please specify basis/rationale in Comment Section below). Rate: ☐ Base: ☐
	☐ Not applicable (no indirect cost are requested). If checked, please specify rationale in Comment Section below.
	☐ Indirect costs are not separately requested as costs are fully burdened.
2.	Fringe Benefit Rates included in this proposal have been calculated based on the following:
	X Rates are consistent with our federally negotiated rates. See Attached
	☐ Other rates (please specify in Comment Section below the basis on which the rate has been calculated)
	☐ Fringe Benefits are not separately requested as costs are fully burdened.
3.	Financial Conflict of Interest – National Science Foundation (NSF)
	Applicable to projects funded by NSF, including NSF flow-through or any sponsor following NSF's COI Policy.
	☐ Not applicable because this project is not being funded by NSF or any other sponsor following NSF's COI Policy.
	X Subrecipient organization/institution hereby certifies that it has an active and enforced policy on conflict of interest
	consistent
	with the provision of NSF Award & Administration Guide Chapter IV.A.
	☐ Subrecipient does not have an active and/or enforced conflict of interest policy and hereby agrees to abide by UCI's policy.
	To comply with UCI's policy, please attach a completed Form 900SR for each investigator on this project.
4.	Financial Conflict of Interest – Public Health Service (PHS)
	Applicable to projects funded by PHS/NIH, or any sponsor following PHS.
	☐ Not applicable because this project is not being funded by PHS/NIH or any other sponsor following the PHS FCOI
	Regulations.
	X Subrecipient organization/institution hereby certifies that it has an active and enforced policy on conflict of interest
	consistent
	with the provision of 42 CFR Part 50 Subpart F.
	☐ Subrecipient does not have an active and/or enforced conflict of interest policy and hereby agrees to abide by UCI's policy.
	To comply with UCI's policy, please attach a completed Form 800SR for each investigator on this project.
5.	Ethics in Research Training
	Applicable to projects funded by NSF or any other programs requiring Ethics in Research Training.
	☐ Not applicable because this project is not being funded by NSF or any other programs requiring Ethics in Research Training.
	X Subrecipient organization/institution hereby certifies that it will ensure that all undergraduates, graduate students, and postdoctoral researchers who will be supported by this NSF proposal will be trained on the oversight in the responsible and ethical conduct of research.
6.	Debarment, Suspension, Proposed Debarment
	Is the PI or any other employee or student participating in this project, debarred, suspended or otherwise excluded from or
	ineligible for participation in federal assistance programs or activities? YES \(\square\) NO X
	If YES, please explain in Comment Section below.
	If NO, the Organization Certifies they (answer all questions below):
	□are X are not presently debarred, suspended, proposed for debarment, or declared ineligible for award of federal
	contracts.

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□ are X are not presently indicted for, or otherwise criminally or civilly charged by a government agency. □ have X have not within three (3) years preceding this offer, been convicted of or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) contract or subcontract; violation of Federal or State antitrust statutes relating to the submission of offers; or commissions of contract or subcontract; violation of Federal or State antitrust statutes relating to the submission of offers; or commission of embezzlement, theft, forgery, bribery, falsification, or destruction of records, making false statements or receiving stolen property. □ have X have not within 3 years preceding this offer, had one or more contracts terminated for default by any federal agency.
Audit Status
 Was the subrecipient required to conduct an annual audit in accordance with the Single Audit Act or Uniform Guidance Subpart F, Audit Requirements for the most recent Audit year? *YES X NO □ a) Was an audit in accordance with the Single Audit Act completed for the most recent fiscal year? Yes X No □ b) Were there any audit findings reported? Yes □ No X If Yes, please clarify in Section H. * If YES is checked, a complete copy of subrecipient's most recent audit report, or the Internet URL link to a complete copy, must be furnished to UCI before a subaward will be issued. URL: Click here to enter text. If no audit was completed OR If Subrecipient is not subject to the Single Audit Act or Uniform Guidance, complete and attach a Mini-Audit Questionnaire (http://www.research.uci.edu/forms/docs/sp/mini-audit-questionnaire.pdf). A limited-scope audit may be required before a subaward can be issued.
Subrecipient Institutional Information
1. Is subrecipient currently registered in Central Contractor Registration via SAM? (www.sam.gov) YES X NO ☐ If NO, organizations that have not registered with CCR will need to obtain a DUNS number first and then access the CCR online registration through the SAM (System for Award Management) home page at https://www.sam.gov (U.S. organizations will also need to provide an Employer Identification Number from the Internal Revenue Service that may take an additional 2-5 weeks to become active). Completing and submitting the registration takes approximately one hour to complete and your CCR registration may take 3-5 business days to process. Subrecipient must maintain current CCR information in SAM.
Comment
Click here to enter text.